Mailing Address

2255 GLADES ROAD SUITE 236 W

BOCA RATON FL 33431

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S77470

Principal Place of Business 2255 GLADES ROAD

BOCA RATON FL 33431

SUITE 236 W

US

EAST WEST REALTY ADVISORS INCORPORATED

					09/04/1991
2. Principal Place of Business 2a. Mailing Addre			<u> </u>		4. FEI Number Applied For
21		26			65-0284587 Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired \$8.75 Additional
27					5. Certificate of Status Desired Fee Required
City & State City & State					6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Country	Zip	_ Country		8. This corporation owes the current year Intangible
24	25	29 30	0		Personal Property Tax.
	9. Name and Address of Curr	ent Registered Agent	81		10. Name and Address of New Registered Agent
COLDOTEINI MADIC D				Name	1
GOLDSTEIN MARK B.			82	Street	t Address (P.O. Box Number is Not Acceptable)
2255 GLADES ROAD					
SUITE 236 W			83		•
BOCA RATON FL 33431			84	City	85 Zip Code
	N.			'	FL s3 Z1p code
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida Statutes	, the abov	e-named	d corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
office or r	egistered agent, or both, in the Sta m familiar with, and accept the obli	gations of, Section 607.0505, Florid	la Statutes	ш е согр i.	porations board of directors. Thereby accept the appointment do registered
SIGNATURE					
SIGNATURE	Signature, typed or printed name of registered a	gent and title if applicable. (NOTE: Re	egistered Age	nt signature	required when reinstating) DATE
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PSD	DELETE	1.1 TITLE		Change Addition
NAME	MILSTEIN, ROBERT G.		1.2 NAME		
STREET ADDRESS	2255 GLADES ROAD STE. 2	36 W	1.3 STREE	T ADDRESS	3
CITY-ST-ZIP	BOCA RATON FL 33431		1.4 CITY+S	T-ZIP	
TILE		☐ DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREE	T ADDRESS	3
CITY-ST-ZIP			2.4 CITY-S	ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREE	TADDRESS	\$
CITY-ST-ZIP			3.4. CITY-5	ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREE	T ADDRESS	6
CITY-ST-ZIP			4.4 CITY- S	T-ZIP	
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREE	TADDRESS	5
CITY-ST-ZIP			5.4 CITY-S	T-ZIP	
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREE	T ADDRESS	3

SIGNATURE:

ROBERT 6. milyeIn

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

FILED May 07, 1999 8:00 am Secretary of State

05-07-1999 90177 018 ***150.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed